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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 09/908,509 07/17/2001 PAT 6,611,705

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/28/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY FL	SHEETS DRAWING 13	TOTAL CLAIMS 104	INDEPENDENT CLAIMS 14
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ADDRESS

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TITLE

WIRELESS ECG SYSTEM

FILING FEE

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of time)